

04-01-11P04:58 RCVD

Please type or print in ink.

11 APR -6 PM 2:00

NAME OF FILER (LAST) (FIRST) (MIDDLE)

Ojeda Steven

1. Office, Agency, or Court

Agency Name

City of Arvin

Division, Board, Department, District, if applicable

City Council

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: Position:

2. Jurisdiction of Office (Check at least one box)

- ☐ State ☐ Judge (Statewide Jurisdiction)  
☐ Multi-County ☐ County of  
☐ City of Arvin ☐ Other

3. Type of Statement (Check at least one box)

- ☒ Annual: The period covered is January 1, 2010, through December 31, 2010. -or- ☐ Leaving Office: Date Left / / (Check one)  
The period covered is / / , through December 31, 2010. ☐ The period covered is January 1, 2010, through the date of leaving office.  
☐ Assuming Office: Date / / ☐ The period covered is / / , through the date of leaving office.  
☐ Candidate: Election Year Office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

- ☐ Schedule A-1 - Investments - schedule attached ☐ Schedule C - Income, Loans, & Business Positions - schedule attached  
☐ Schedule A-2 - Investments - schedule attached ☒ Schedule D - Income - Gifts - schedule attached  
☐ Schedule B - Real Property - schedule attached ☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is  
I certify under penalty of perjury under the laws of the State of California that

Date Signed 4-1-11  
(month, day, year)

Signature



Attachment to FPPC Form 700

Name: Steven Qjeda  
Type of Statement  
(check one)

CA-01-11P04:58 RCVD

\_\_\_ Assuming Office/Initial Date: \_\_\_/\_\_\_/\_\_\_

☒ Annual:(check one)

☒ The period covered is January 1, 2010 through December 31, 2010.  
-or-

\_\_\_ The period is \_\_\_/\_\_\_/\_\_\_, through December 31, \_\_\_.

\_\_\_ Leaving Office Date Left: \_\_\_/\_\_\_/\_\_\_  
(Check one)

\_\_\_ The period covers is January 1, \_\_\_ through the date of leaving office.

-or-

\_\_\_ The period covered is \_\_\_/\_\_\_/\_\_\_ through the date of leaving office.

Additional Agencies/Positions:  
(Check all the apply)

☒ Arvin Community Redevelopment Agency  
\_\_\_ Chairperson ☒ Member \_\_\_ Other: \_\_\_

☒ Arvin Public Financing Authority  
\_\_\_ Chairperson ☒ Member \_\_\_ Other: \_\_\_

☒ Arvin Housing Authority  
\_\_\_ Chairperson ☒ Member \_\_\_ Other: \_\_\_

\_\_\_ Kern Council of Governments  
\_\_\_ Chairperson \_\_\_ Member \_\_\_ Other: \_\_\_

Agency

Position

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(d)(5)



4-1-11

Date